RESULTS 2020

CATALYZING TRANSFORMATION IN THE UNITED NATIONS AND SUPPORTING COUNTRIES TO DELIVER HEALTH RESULTS FOR WOMEN, CHILDREN AND ADOLESCENTS

H6 RESULTS FRAMEWORK 2018-2020
A CALL TO ACTION

Commitment to improving the health and well-being of women, children and adolescents over the past 25 years has brought significant results. Between 1990 and 2015, the mortality rate among children under five worldwide dropped by 56%, while the number of women dying each year from maternal causes decreased by 43%.

Around the world, however, far too many women, children and adolescents still have little or no access to quality health services and education, clean air and water, adequate sanitation and good nutrition. And far too many face violence and discrimination, unequal access to power and opportunity, and numerous policy, social and legal barriers that undermine their agency and harm their physical, mental and emotional health and well-being.

As a result, progress in implementing the Every Woman Every Child Global Strategy for Women’s, Children’s and Adolescents’ Health (EWEC Global Strategy) and the Sustainable Development Goals remains too slow and uneven. Each year, more than 300,000 women die from preventable causes during pregnancy and childbirth, with more than half of maternal deaths occurring in sub-Saharan Africa. In 2016, an estimated 5.6 million children under five and 1.2 million adolescents (10-19 years) died, mainly of avoidable causes. Many more suffer illness and disability and fail to reach their full potential, resulting in enormous loss and costs for countries both today and for future generations.

The global community can and should do more. To accelerate positive change for the health and well-being of women, children and adolescents, the H6 is strengthening its partnership to enhance delivery at the country level. In doing so it can also serve as a living laboratory for UN reform—heeding the call of the UN Secretary-General for a more country-focused, coordinated, efficient and accountable development system better able to assist countries in implementing the 2030 Agenda for Sustainable Development (see Figure).

This Framework will guide the H6 in shaping a more effective, results-based partnership. With little more than 30 months to achieve the 2020 milestones, the time for implementation is now.

H6: UNIQUE, VALUED PLATFORM FOR COUNTRY SUPPORT

The H6 Partnership harnesses the collective strengths of UNFPA, UNICEF, UN Women, WHO, UNAIDS and the World Bank Group to advance the EWEC Global Strategy and support country leadership and action for women’s, children’s and adolescents’ health. By uniting the mandates of these six organizations, the Partnership increases the volume and coherence of technical support, policy engagement, advocacy and investments, minimizes overlap and duplication, and deepens collaboration to improve sexual, reproductive, maternal, newborn, child and adolescent health (SRMCAH) outcomes.

As the technical arm of the EWEC movement, the role of the H6 is to strengthen country capacity in building sustainable and resilient health and social systems to improve SRMCAH. The Partnership drives progress on prevention of ill-health and
the determinants of women’s, children’s and adolescents’ health through joint action, based on the principles of human rights and gender equality, that extends beyond the health sector, including education, nutrition, water and sanitation, energy, the environment and others. The H6 also plays a central role in ensuring that financial resources invested in SRMNCAH programmes, including support from the Global Financing Facility (GFF), are optimally utilized and deliver maximum impact.

The H6 has brought increased coherence through:

1. Strengthening systems for SRMNCAH: the H6 contributes across all WHO health system building blocks to improve capacity and quality of services for SRMNCAH. It also improves the quality of care, especially at subnational level, integration of SRMNCAH services, including those for HIV, health worker capacity, referral and outreach. Its interventions are complementary, catalytic and aligned with national priorities.

2. Expanding access to services: the H6 contributes to increasing people’s ability to access integrated SRMNCAH services, including by: consistently targeting service provision to underserved and hard-to-reach areas and poor communities; engaging communities to strengthen demand for quality, non-discriminatory services, and; empowering women, children and adolescents to claim their rights to health.

3. Responding to changing national and local needs: the H6 is a flexible, responsive partnership, able to adjust and respond to changing needs and priorities at country level, including by strategically engaging additional partners.

4. Supporting innovations: the H6 supports scaling up of new interventions and approaches in countries and facilitates cross-country learning, among other things through south-south cooperation.

5. Leveraging comparative advantage through an informal division of labour: H6 partners deliver through an effective division of labour to optimize individual contributions and collective strength, and avoid duplication and overlap, resulting in more effective technical support and advocacy as “one voice” at country level, as well as the development of high-quality global knowledge products.

FIGURE. HOW H6 WAYS OF WORKING EMBODY PRINCIPLES GUIDING REPOSITIONING OF THE UNITED NATIONS DEVELOPMENT SYSTEM

To better assist countries in implementing Agenda 2030, UN reform is shaping a development system that is prevention-oriented and gender-responsive, as well as:

- **COUNTRY-LED AND -OWNED**: Delivers coordinated, on-demand and responsive technical support to countries to strengthen health systems.
- **FIELD-FOCUSED AND COUNTRY-CONTEXTUAL**: Provides flexible coordinated technical support platforms for SRMNCAH in 46 countries.
- **WELL-COORDINATED**: Supports development of country-owned SRMNCAH roadmaps through transparent, inclusive multi-stakeholder processes.
- **RESULTS-BASED**: Unites six organizations, increases volume and coherence of technical support, policy advice, advocacy and investments; minimizes overlap and duplication; and deepens collaboration.
- **PARTNERSHIP-ORIENTED**: Enhances high-level leadership and joint planning, implementation and evaluation.
- **ACCOUNTABLE TO PEOPLE**: Makes measurable contribution to increased access to SRMNCAH services, and improved capacity and quality of services.
- **Delivers coordinated, on-demand and responsive technical support to countries to strengthen health systems**.
- **Provides flexible coordinated technical support platforms for SRMNCAH in 46 countries**.
- **Supports development of country-owned SRMNCAH roadmaps through transparent, inclusive multi-stakeholder processes**.
- **Unites six organizations, increases volume and coherence of technical support, policy advice, advocacy and investments; minimizes overlap and duplication; and deepens collaboration**.
- **Enhances high-level leadership and joint planning, implementation and evaluation**.
- **Makes measurable contribution to increased access to SRMNCAH services, and improved capacity and quality of services**.
- **Plays critical role in making the money work – ensuring resources are optimally utilized and deliver maximum impact**.
- **Leverages convening power by facilitating strategic dialogue, brokering political consensus and engaging additional partners on relevant results, including communities, non-health actors, private sector and humanitarian actors**.
- **Ensures civil society engagement in H6 governance; supports inclusive country accountability mechanisms**.
- **Conducts joint evaluations to assess partnership performance, efficiency and joint working, and how H6 contributes to UN reform efforts**.
A FOCUS ON RESULTS BY STRENGTHENING WAYs OF WORKING

This H6 Results 2020 Framework builds on the achievements of the H6 to date and reinforces existing mechanisms while focusing the Partnership on selected results and priorities and leveraging the UN reform agenda. By strengthening ways of working, the H6 aims to position itself as countries’ main and preferred source of technical advice and support for SRMNCAH policies, strategies and best practices, as well as data and convening stakeholders.

Aligned with the 2020 EWEC Framework, this document presents goals that contribute to the Survive, Thrive and Transform agenda, concrete results for 2020 and a number of functions that emphasize coordination, efficiency, inclusiveness and impact (see Table 1). It further presents H6 priorities under each EWEC Focus Area, which capture the key areas of H6 work (though not exhaustive) in driving progress. It outlines how the H6 will align and harmonize efforts of the six organizations and with key partners, and focus on countries with high burdens of maternal, child and adolescent mortality and morbidity for intensified action.

Overarching goals

1. All young children’s environments are healthy, safe, nurturing and responsive.
2. All adolescents are supported and enabled by their environment (policy, social and other) to develop the knowledge, skills and agency to protect their mental and physical health and well-being.
3. All people, especially women and adolescents, have access to comprehensive sexual and reproductive health information, services and rights protection, fully integrated into strong health and community systems.
4. All women, children and adolescents can exercise their right to quality care in health services without discrimination.
5. All women, girls, adolescents and communities are empowered to engage meaningfully in and influence all levels of health decision-making.
6. All people, especially the most vulnerable, have access to uninterrupted health services and support in humanitarian settings, as part of resilient, prepared and responsive health and social systems.

Given the multi-sectoral nature of these goals, the H6 provides an ideal platform to elevate them as political and strategic priorities. It will convene partners to identify solutions and agree on joint and coordinated actions, and deliver strategic leadership, policy advice and technical support for country-owned breakthrough progress (see table 1).

Boosting H6 added value

The H6 is committed to amplifying its added value, translating UN reform into better health results for women, children and adolescents.

We will deliver seamless technical support to countries and eliminate overlap and duplication through joint support in development of country roadmaps; streamlining country and global working arrangements; increasing policy and operational coherence, and; intensifying joint planning, programming, implementation, reporting and accountability.

We will strengthen political advocacy by ensuring H6 agencies speak with one voice, targeting a wider range of partners, empowering civil society in their advocacy efforts, and generating stronger strategic information on gaps, determinants of health and returns on investment.

We will boost H6 convening power by brokering multi-stakeholder political consensus in line with principles of country ownership, convening strategic dialogue at all levels, and engaging additional partners on relevant results, including civil society networks, non-health actors and those working in humanitarian settings.

"THE H6 PARTNERSHIP HAS PROVEN THAT WORKING IN CLOSE COLLABORATION AND BRINGING DIFFERENT EXPERTISE AND EXPERIENCE TO THE TABLE IS NOT ONLY EFFECTIVE IN ENABLING COUNTRIES TO DELIVER RIGHTS-BASED QUALITY CARE FOR THE WOMEN AND GIRLS LEFT FURTHEST BEHIND, BUT ALSO ENSURES STRONG COUNTRY OWNERSHIP."

NATALIA KANEM
EXECUTIVE DIRECTOR, UNFPA
### Table 1. H6 Strategic Priorities, Results and Functions in Support of the EWEC Global Strategy

#### 2030 EWEC Global Strategy & SDG Targets

**Reduce maternal mortality**  
End preventable deaths of newborns and children under 5 years of age  
Reduce adolescent mortality  
End HIV, TB, and malaria  
Universal access to SRHR  
Eliminate all harmful practices and all discrimination and violence against women and girls  
Enhance the global partnership for sustainable development

#### H6 Strategic Priorities, by EWEC Focus Area

<table>
<thead>
<tr>
<th>Early Childhood Development (ECD)</th>
<th>Adolescent Health</th>
<th>Quality, Equity &amp; Dignity</th>
<th>Sexual and Reproductive Health and Rights (SRHR)</th>
<th>Empowerment of Women, Girls, and Communities</th>
<th>Humanitarian and Fragile Settings</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Access to integrated essential childhood services (incl. newborn care, pneumonia, diarrhoea, immunization), with a focus on bridging the gap in access for the most marginalized children</td>
<td>• Adolescent-friendly SRHR, mental health, and violence, injury and NCD prevention policies &amp; services in all settings</td>
<td>• Quality of care provisions for SRMNCAH in national plans and institutional mechanisms established to support implementation</td>
<td>• Universal and rights-based access to contraceptive information and services</td>
<td>• Fostering equitable gender norms and eliminating harmful practices i.e. female genital mutilation and early &amp; forced marriage</td>
<td>• Uninterrupted access to SRHR services in humanitarian settings</td>
</tr>
<tr>
<td>• Integrated ECD intervention package of stimulation, protection and nutrition</td>
<td>• Enabling policy environment, including removing age-of-consent laws to access health services</td>
<td>• Capacity strengthening in health services and measurement of progress in addressing Quality of Care, including development of a global QED learning environment</td>
<td>• Access to safe abortion (where legal), and universal access to post-abortion care</td>
<td>• Strengthening health system and multisectoral responses to interpersonal violence, particularly against women, children and adolescents</td>
<td>• Zero tolerance for sexual and gender-based violence</td>
</tr>
<tr>
<td>• Every Newborn Action Plans</td>
<td>• Comprehensive sexuality education</td>
<td>• Demand creation for quality and non-discriminatory care and rights literacy campaigns mounted</td>
<td>• Universal access to comprehensive maternal and newborn care through strategies for ending preventable maternal mortality</td>
<td>• Gender-responsive budgeting for SRMNCAH interventions, including in GFF investment cases</td>
<td>• Complementarity to cross-cluster coordination on SRHR and preventing sexual violence</td>
</tr>
</tbody>
</table>

#### H6 Results for 2020—In Priority Countries, Progress Accelerated on the Following Indicators:

- Integrated, cross-sectoral plans that include Early Child Development for children under five
- National plans or strategies providing for social protection
- Every Newborn Action Plans
- Inclusive, multi-sectoral rights-based, costed national plans
- Multi-sectoral coordination mechanisms for adolescent health that enable adolescent engagement in health policy and programming
- Comprehensive sexual education programs in schools
- National vision, strategy and operational plan (with targets) for improving quality of care in MNH services developed
- Quality of care committees in district health management teams (including representatives from the community and women’s associations) established and functioning
- Quality of care Hospital assessments conducted
- Integrated SRHR services, including contraception, HIV, STIs, included in gender-responsive, rights-based costed national plans
- SRHR policy dialogues conducted, and plans and advocacy for reforming policies in place
- Maternal and Perinatal Death Surveillance and Response (MPDSR) routinely conducted
- Legislation that ensure equality and women’s empowerment, including reforming discriminatory laws
- Rights-based national multi-sectoral plans addressing violence against women and girls and harmful practices (FGM, early and forced marriage)
- Comprehensive post-rape care in health services
- Systems to track and make public allocations for gender equality and women’s empowerment
- Human-rights based and gender-responsive SRMNCAH plans integrated into emergency preparedness and response plans
- Increased equitable financing to SRMNCAH, including access to lifesaving commodities in humanitarian and fragile settings

#### H6 Functions

**Technical Support**

- One-stop shop for technical support and strategic policy advice
- Leverage health investments
- Strengthen capacity for strategic information including through enhanced data hubs

**Convening**

Support country-led multistakeholder health platforms and partnerships

**Advocacy**

Mobilize political commitment to accelerate progress on EWEC focus areas
H6 FUNCTIONS

To drive progress towards these results, while reinforcing systems for sustainable health, the H6 is committed to delivering on a number of functions, in line with its broader roles of delivering technical support, convening and advocacy, including:

A. One-stop shop for on-demand technical support and strategic policy advice:
The Technical Support Platform (TSP)’s core function will be to offer a single solution to meeting requests for quality short- and medium-term technical support, including strategic policy advice, that is tailored to the context and contributes to meaningful capacity strengthening and results. Support will be delivered as much as possible through south-south approaches and the use of national and regional expertise. Building on existing technical support procurement instruments, the TSP will aim to catalyze progress and support innovative solutions, and facilitate the sharing of knowledge and best practices between countries. It will further contribute to transparency and accountability of technical support by enabling tracking and monitoring of progress in its delivery, and providing an online platform for user-generated ratings and reviews of providers.

H6 country and regional teams will play a critical role in supporting countries to develop, implement and monitor SRMNCAH plans and roadmaps through transparent multi-sectoral and multi-stakeholder processes that assess gaps, set targets, and prioritize key interventions and partnerships. H6 country and regional teams will define their technical priorities based on the country context and the priorities of respective roadmaps, in alignment with national SRMNCAH priorities. Roadmaps will also inform SRMNCAH investment cases, including those supported by the GFF, while identifying additional country priorities and technical support needs related to the H6 Results 2020 framework.

B. Supporting countries to leverage health investments:
The H6 will expand support to countries to access and optimize funds for SRMNCAH, by working with the GFF and other funding partners to strengthen the investment case process, including design, implementation and monitoring. Several H6 priority countries do not have an investment case yet. The H6 will bring added value to investment cases by encouraging:

- Technical support to countries in optimizing SRMNCAH resources;
- Focus on equity, human rights and structural drivers in investment cases;
- Strategic use of data to inform country priority setting for investment cases;
- Emphasis on economic and social returns on investment to make a convincing case for mobilizing domestic and other resources;
- Inclusion and active participation of civil society and other sectors.

C. Strengthening country capacity to generate and use strategic information through enhanced data hubs:
The H6 and the broader EWEC ecosystem have extensive experience in empowering countries to strengthen their responses through improved data systems, including HMIS and HIMIS2, and strategic information. The H6 will build on this expertise and existing work, such as the EWEC Global Strategy Data Portal, to better support countries in collecting, visualizing and using strategic information to identify gaps, show returns on investment, prioritize responses and drive accountability. Building on experience in gathering data on enabling legal and policy environments for health, including political leadership and human rights, the H6 will work with countries to facilitate monitoring of additional variables that will be key to accelerating progress.

D. Supporting country-led multi-sectoral and multi-stakeholder platforms and partnerships for health on results:
The H6 will increasingly leverage the UN’s convening power to support innovative country-led partnerships with business, bilateral agencies, regional political bodies, funding partners, humanitarian actors, civil society organizations and communities to identify targeted investment, policy and technical support opportunities, and support coordination and integration of programmes. The H6 will also build on the UN’s unique brokering role at country level to address cross-cutting issues and unblock hurdles to programme implementation.

The H6 will contribute to breaking down silos between humanitarian responses, and health and development efforts. It will strengthen working arrangements with entities that have relevant mandates and capabilities, such as IOM, UNHCR, OCHA and WFP.

The H6 will leverage its convening power to strengthen country accountability mechanisms. The H6 will support countries to empower beneficiaries as active change agents through their inclusion in annual participatory reviews of country progress and the functioning of the Partnership.

E. Mobilizing political commitment to the EWEC focus areas:
The H6 will leverage its experience in coalition building, strategy development, political advocacy, and technical expertise to lead global campaigns, elevate dialogue, mobilize political leadership, and rally partners at all levels around common results and accountability.
SPOTLIGHT ON ADOLESCENTS

Adolescent girls and boys (aged 10-19) remain a particularly underserved population by health and social programmes of many countries. Alcohol and/or tobacco use, lack of physical activity, exposure to violence, unprotected sex and early childbirth jeopardizes the health of adolescents, and their health as adults, demanding tailored interventions that respond to the unique needs, burden of ill-health and challenges faced by this age group. Adolescents may also face unique forms of gender-based discrimination, such as limitations on access to sexual and reproductive health, early, child and forced marriage, sexual abuse and exclusion from education, social protection and decision-making—all of which are likely to have negative impacts on physical and mental health.

To meet their distinct health needs, which vary by age, gender and context, adolescents require access to information, support and integrated services for health, including for prevention (e.g. HPV vaccination; voluntary medical male circumcision; interpersonal violence; and tobacco, alcohol and drug use), testing (e.g. for HIV), and youth-friendly care (increasingly for drug and alcohol use and NCDs). They also often need support to create demand (e.g. for condoms) and increase agency (e.g. increasing capacity and skills of young women and adolescent girls to negotiate safer sex). All adolescents need access to comprehensive sexuality education (e.g. to enhance SRHR/HIV knowledge, address power in relationships and promote gender equality).

Investments in adolescent health delivers a triple dividend of benefits—for adolescents now, for their future adult lives, and for the next generation. Ensuring the health and well-being of adolescents is critical to delivering on the mandate of each of the H6 partners. As such, the H6 is committed to accelerating focus on this critical yet neglected group, building on recent momentum and initiatives such as the Global Accelerated Action for the Health of Adolescents (AA-HA!) and Start Free, Stay Free, AIDS Free, and making universal health coverage work for adolescents.

The H6 will support countries to catalyze change to enhance adolescent health and well-being through technical support across a range of functional areas, including to:

1. Develop, implement and review laws to establish an enabling legal environment;
2. Develop, implement and monitor rights-based policies and strategies;
3. Scale up programme implementation with fidelity and equity;
4. Enable inclusive monitoring and reviews, and improved collection and use of sex- and age-disaggregated data;
5. Undertake operational and other research; and,

FOCUS COUNTRIES

The H6 serves as the main provider of technical support for operationalizing the EWEC Global Strategy. The H6 works through dedicated coordination mechanisms in 46 countries, including in countries in fragile states and with humanitarian settings, and delivers coordinated technical support to many more.

To ramp up focus on the countries most in need, 25 countries will be identified on the basis of a set of criteria for a package of intensified H6 support. Criteria include: high rates of mortality and morbidity among women, children and adolescents; inadequate progress on key indicators across the continuum of care; potential for progress towards the H6 goals; strong H6 capacity and existing H6 coordination mechanism; H6 complementarity to EWEC partner initiatives; strong country leadership, and, geographical balance (across West and Central Africa, Eastern and Southern Africa, Asia and Latin America and the Caribbean).

Among these 25 countries, the H6 will select 15 countries for further focused efforts to demonstrate that applying UN reform principles can lead to rapid results (including in humanitarian settings) in a first wave approach.

“OUR COLLABORATION AS A UN PARTNERSHIP ON SEXUAL, REPRODUCTIVE, MATERNAL, NEWBORN, CHILD AND ADOLESCENT HEALTH PROVIDES A VALUABLE PLATFORM FOR US TO ADDRESS, IN THE SPIRIT OF ONE UN, THE CRITICAL POINTS AT WHICH A WOMAN NEEDS INFORMATION, SERVICES AND OPPORTUNITIES TO MAKE INFORMED HEALTH CHOICES ACROSS HER LIFE SPAN.”

PHUMZILE MLAMBO-NGCUKA
EXECUTIVE DIRECTOR, UN WOMEN
H6 JOINT WORKING ARRANGEMENTS

Country level
- H6 country chair identified (among the six H6 agencies; rotation every two years) on country by country basis, based on agency capacity at country level.
- Depending on country context, H6 country teams engage partners beyond the six H6 agencies to coordinate on country priorities and drive progress on country roadmaps around joint programmes of action (e.g. IOM in countries heavily affected by migration).

Regional level
- Regional teams play a critical role in providing technical support to countries in SRMNCAH, as demonstrated by the H6/Muskoka platform in Western and Central Africa. Regional H6 teams will designate leaders on key thematic areas, engage regional champions and involve additional partners and other sectors to strengthen links to regional initiatives.
- Cross-country communities of best practice will be established on certain results or related issues that are particularly challenging, to share best practices and opportunities.

Global level
- The H6 Chair and Deputy Chair (executive head of agency level) lead and coordinate the Partnership serving two-year rotating terms (terms of reference to be developed).
- Single virtual secretariat of H6 Global Coordinators (one dedicated but not necessarily full-time senior staff per agency). Global Coordinators will liaise with the H6 Chair and coordinate as needed with relevant technical focal points, the H6 Technical Working Group (of which all are members) and other groups such as the Adolescent and M&E coordination groups, to provide technical guidance, monitoring, course correction and backstopping to country and regional efforts, reinforce a unified policy voice and provide continuity.
- Programme monitoring and management. It is envisioned that one to two dedicated full-time staff will support coordination and financial follow-up.

ALIGNING PARTNERS IN THE EWEC ECOSYSTEM

Recognizing the need to streamline and align the EWEC architecture to increase efficiency, minimize duplication, and improve programmatic coherence the H6 will enhance its complementarity with core partners of the EWEC ecosystem, including GFF, PMNCH and the EWEC Secretariat and the High-Level Steering Group.

GFF — the financing arm
The GFF provides smart, scaled and sustainable financing to support country-led investment plans in support of women’s, children’s and adolescent health. Whereas the GFF is a financing modality, the H6 provides the country technical platform for optimizing investments. As GFF-supported countries grow, the H6 is planning to expand its support to countries in designing, implementing and monitoring investment cases (as described above).

PMNCH — the advocacy arm
PMNCH focuses on accountability, alignment, analysis and advocacy for EWEC. The Partnership support multi-stakeholder platforms to engage and align stakeholders (especially under-represented constituencies) in support of the EWEC movement. PMNCH also strengthens the capacity of its members to participate meaningfully in these platforms, and to undertake multi-stakeholder advocacy and accountability in support of national priorities, including investment cases. PMNCH hosts the EWEC’s Independent Accountability Panel. The H6 will work with PMNCH and GFF in defining clear, complementary roles on a country-by-country basis in strengthening country-led coordination, advocacy and accountability mechanisms.

EWEC Secretariat
The EWEC Secretariat provides direct support to the Executive Office of the UN Secretary-General as well as the High-Level Steering Group in their stewardship of the EWEC movement and supports alignment of the EWEC ecosystem.

“BUILDING ON OUR TRADITION OF WORKING TOGETHER TO SUPPORT COUNTRIES AS MEMBERS OF THE H6, WE WILL PROVIDE COORDINATED TECHNICAL SUPPORT TO COUNTRY-LED EFFORTS TO IMPLEMENT THE GLOBAL STRATEGY AND ACHIEVE THE AMBITIOUS TARGETS OF THE HEALTH-RELATED SDGs.”

TEDROS ADHANOM
DIRECTOR-GENERAL, WHO
HOLDING THE H6 ACCOUNTABLE

Evaluation
The H6 experience provides an opportunity to innovate and strengthen UN system-wide evaluation, and promote continuous learning through joint monitoring and evaluation approaches, as part of the UN Secretary-General’s reform agenda.

Evaluations will cover the global, regional and country levels, and assess elements such as political commitment generated through the Partnership, engagement of other partners through H6 initiatives, data and strategic information generated as a basis for policies and programmes, international and domestic resources leveraged through H6 advocacy, and type and quality of support provided by the Partnership.

Evaluations will assess the performance and efficiency of H6 processes and management, and how the H6 demonstrates effective joint work and contributes to ongoing UN reform efforts. Joint evaluations will continue to inform policy and management and produce evidence of the impact and value for money of investments across the H6 results.

In line with previous practice, independent evaluations will be periodically commissioned.

Joint reporting
Regular progress reports based on monitoring and evaluation findings will be produced.

The H6 will propose an ad hoc agenda item at the UN Secretary-General’s Chief Executives Board for Coordination on H6 progress under the Results 2020 Framework as a contribution to the UN reform discussion.

H6 Principals will be supported to include an H6 agenda item at their respective Boards’ meetings.

Reporting by the H6, PMNCH and the GFF will be further harmonized, including to the High-Level Steering Group for EWEC (and Independent Accountability Panel), to ensure a cohesive, comprehensive understanding of opportunities, results and ongoing challenges.

H6 BUDGET SUMMARY, 2018-2020

In the context of the changing development cooperation landscape, the H6 will advocate for additional resources for SRMNCAH, both domestic and through global solidarity, particularly through the GFF. As the number of GFF-supported countries expands, demand for H6 technical support—critical to leveraging SRMNCAH investments—is growing rapidly.

Beyond the ongoing contribution and support of the H6 agencies to the health and well-being of women, children and adolescents, the H6 will mobilize additional resources to provide a predictable and flexible pool of resources for joint technical support to make the EWEC money work. Resources will be catalytic in nature—promoting positive change in policies, institutions and systems, while also ensuring complementarity with other investments in women’s, children’s and adolescents’ health. This will include:

1. Enhancing H6 coordinated support to country-led development, implementation and monitoring of national SRMNCAH plans, roadmaps and investment cases;
2. Strengthening sustainable long-term country capacity to implement roadmaps (e.g. data collection and capacity strengthening; multi-stakeholder platforms and inclusive country reviews);
3. Providing a range of global public goods;
4. Supporting south-south cooperation;
5. Enhancing advocacy at all levels;
6. Monitoring and evaluating the H6 Partnership.

The budget for the period of 2018-2020 is estimated at USD 70 million, to complement existing support from each of the six partner organizations (see Table 2). Additional funds will focus on country support to address funding gaps in technical support and to respond to specific technical requests from countries on cross-cutting SRMNCAH issues.

This budget will allow the H6 to provide catalytic funding for jointly supporting 25 priority countries across the SRMNCAH spectrum (at approximately USD 1 million per year per country). Building on the strengths of the six partner agencies, the H6 will bring additional resources to support cross-cutting SRMNCAH issues and match resources to gaps. It will also play a crucial role in improving health-enhancing synergies with poverty reduction, education and gender equality initiatives. The budget will contribute to filling gaps for the development of global public goods to advance the SRMNCAH agenda.

In addition, in 15 first wave countries, further resources will be required for enhanced H6 operations, focused on filling gaps in line with H6 2020 Results through a joint programming approach.
“THE WORLD BANK GROUP HAS A LONG HISTORY OF INVESTING IN WOMEN AND CHILDREN’S HEALTH, NOT ONLY BECAUSE IT IS THE RIGHT THING TO DO, BUT ALSO BECAUSE IT IS THE SMART THING TO DO.”

KRISTALINA GEORGIEVA
CHIEF EXECUTIVE OFFICER, WORLD BANK

TABLE 2. COSTING FOR H6 ACTIVITIES, BY END OF 2020 (24 MONTHS)

- **1.4 million** Monitoring and evaluation (including project monitoring and management, and independent evaluation of implementation and impact)
- **3 million** Advocacy
- **5 million** Support to south-south cooperation, knowledge sharing
- **5 million** Global Public Goods
- **50 million** Funding for joint technical support in 25 countries
  - 1 million / per country / per year
  - Totaling 50 million

**TOTAL = USD 70 million**

Programme support / indirect costs