

PMNCH Update & Civil Society Discussion - NOTES

Date: August 5, 2013

Time: 12:00 – 1:30 pm

Hosted by: White Ribbon Alliance, Washington, DC

Speakers: Ann Starrs, FCI, Catharine Taylor, PATH, and Theresa Shaver, WRA (3)

Participants:

In-Person: Eden Ahmed Mdluli, Africare; Charlene Reynolds, MCHIP; Laura Gustafson, Jhpiego; Antony Duttine, Handicap International; Jean Capps, Independent; Emma Clark, IMC; Karen LeBan, CORE Group; Shannon Downey, CORE Group; Alli Dean, CORE Group (9)

Call-In: Sarah Alexander, GAPPS; Alan Talens, World Renew; Mary Lou Fisher, Samaritan's Purse; Kate Eardly, WVI; Ashley Latimer, PATH; Holly Blanchard, Jhpiego (6)

An update on the Partnership for Maternal, Newborn & Child Health (PMNCH) was provided by the Civil Society Representatives for CORE Group Members and Partners as an effort to reach the civil society constituency and better engage partners in a discussion on PMNCH directions, strategic issues, and other related global initiatives.

The civil society constituency is led by Theresa Shaver, White Ribbon Alliance, and Alternate Catherine Taylor, PATH; Stefan Germann, WVI and Alternate Kate Eardley, WVI; Rajiv Tandon, SC/India and Alternate Patrick Watt, SC International; and Tewodros Melesse, IPPF and Alternate Julia Bunting, IPPF.

Agenda:

- 1) Short overview from last PMNCH Board meeting**
- 2) Coordination between Global Partnerships**
- 3) Update on Countdown 2015**
- 4) Open discussion with CORE Group Membership**
 - **How we can represent civil society organizations better on the PMNCH Board**
 - **Recommendations about increasing engagement at the National and Global Level**

Summary of Discussion Recommendations:

- Design appropriate instruments that allows NGOs to provide data and activities they are engaged in (previous survey was extremely confusing); perhaps post on website to make widely available to NGOs
- Need funding for meeting participation; difficult for NGO participants to get to civil society meetings without funding and/or look at other platforms for engagement
- Need perspectives from other health sectors (e.g. disability groups)
- Foster a more inclusive meeting environment: less jargon; consider how partners at the table can be intimidating
- Propose a pre-Board meeting consultation with NGOs or a Speaker's Corner at the next Board meeting

Notes & Discussion Points:

Theresa Shaver, WRA

PMNCH Overview

The Partnership (PMNCH) joins the reproductive, maternal, newborn and child health (RMNCH) communities into an alliance of more than 500 members, across seven constituencies: academic, research and teaching institutions; donors and foundations; health-care professionals; multilateral agencies; non-governmental organizations; partner countries; and the private sector. Working together our goal is a world in which all women, newborns, children and adolescents not only are healthy, but thrive.

The Partnership enables partners to share strategies, align objectives and resources, and agree on interventions to achieve more together than they would be able to achieve individually. For more information, go to: <http://www.who.int/pmnch/about/en//>

Governance

The key bodies that oversee the PMNCH work are the PMNCH Board, its Committees and the Partners' Forum, agreed and defined in the PMNCH Strategic Framework and supported by the PMNCH Secretariat. For more information, go to: <http://www.who.int/pmnch/about/governance/en/>

PMNCH Board

Size and composition

The Board consists of no more than 23 members selected from amongst the Partners' Forum membership. Board Members represent seven constituencies (see below), ensuring there is a balance between reproductive, maternal, newborn and child health and between national and international institutions as well as a mix of geographical representation.

Seats on the Board are allocated to representatives as follows:

- Academic/research/training institutions (three);
- Developing countries, represented through the Ministry responsible for health (four);
- Donor governments/agencies and foundations, including one specific seat for a foundation (four);

- Healthcare professional associations (three);
- Multilateral organizations with a health mandate related to MDGs 4 and 5: UNICEF, UNFPA, WHO and the World Bank (four);
- Non-governmental organizations (four);
- Optional seat which may be filled by an additional bilateral donor (one).

[PMNCH Executive Committee](#)

[PMNCH Finance Committee](#)

[PMNCH Partners' Forum](#)

- [2007 Partners' Forum – Dar es Salaam, Tanzania](#)
- [2010 Partners' Forum – New Delhi, India](#)

Strategic Framework

[2012 Strategic Framework and accompanying Workplan and Budget documents](#)

The PMNCH Board adopted the 2012-15 PMNCH Strategic Framework and aligns the yearly Workplans and budgets according to three Strategic Objectives (SO): SO1 - Knowledge, SO2 - Advocacy, and SO3 - Accountability

1) Two Board Meetings per year: Last meeting was June 26 – 27, 2013

Presentation included decision points and recommendations on each of the areas outlined below. A more detailed report will be made available at:

<http://www.who.int/pmnch/about/governance/board/govcalendar/en/index.html>

Summary of Meeting Topics:

Executive Director Report

- Continued appreciation for the value add of Partners' activities through PMNCH
- EC and Board to regularly assess and define PMNCH strategic focus and value-add (focus on gaps, new initiatives, and activities that can be transitioned)
- Important to continue to leverage constituencies and strengthen partner engagement, reflecting available capacity at Secretariat
- Call for enhanced strategic focus on adolescent health – to facilitate policy coherence and advocacy across Partner activities, including engagement of adolescents at the community level

Post 2015 Strategy <http://www.who.int/pmnch/activities/advocacy/globalstrategy/en/index.html>

Every Newborn <http://www.globalnewbornaction.org/>

Global Investment Framework for Women's and Child Health

Financing for RMNCH

Accelerating Progress toward Improved Women's and Children's Health in Africa

Implementation of Essential Interventions: Multi-stakeholder Action in Uttar Pradesh, India

Speaker's Corner

Governance Issues: PMNCH Evaluation

Report of the Finance Committee

Key Issues Highlighted:

- How to better engage civil society?
- 400+ NGO members, but few actively participate.

2) Countdown 2015 Overview: <http://www.countdown2015mnch.org/>

Ann Starrs, FCI (Co-Chair, Countdown – Communications & Events)

Countdown aims to:

- disseminate the best and most recent information on country-level progress
- take stock of progress and propose new actions
- hold governments, partners and donors accountable wherever progress is lacking

Countdown moving forward:

Four streams of work to promote accountability up to 2015 and beyond

- Produce country profiles/report every year
- Conduct analyses and generate new knowledge, including special reports on priority indicators for the accountability agenda
- Share findings through products and events
- Support country-level Countdowns and in-depth case studies focusing on sub-national data and response

Latest Publication: *Accountability for Maternal, Newborn & Child Survival: The 2013 Update*

<http://www.countdown2015mnch.org/reports-and-articles/2013-report>

3) The Global RMNCH Architecture, 1000 DAYS, and the UN Commission on Life-Saving Commodities

Catharine Taylor, PATH

Presentation provided an overview of the different global strategy initiatives in relationship to Every Women Every Child and the RMNCH response.

- RMNCH Steering Committee – ways of working are still evolving
- RMNCH Trust Fund
- RMNCH Strategy and Coordination Team

4) Actions Steps:

Sign-up for PMNCH E-Blast: <http://www.who.int/pmnch/media/newsletters/en/index.html>

Share your news: Members of The Partnership community are urged to send all news, events and recent publications regarding reproductive, maternal, newborn and child health.

<http://www.who.int/pmnch/getinvolved/share/en/index.html>

Support further collaboration between CORE Group *Community Health Network* and PMNCH to increase civil society and NGO engagement, discussions, and contributions.